

Fort Sill Child And Youth Services

Illness Control Data

_____ has been excluded from TCDC, FCC Home, SAS Before and After, or Camp program for the following reason(s):

- | | |
|--|---|
| <input type="checkbox"/> Temperature _____ | <input type="checkbox"/> Diarrhea _____ |
| <input type="checkbox"/> Skin Rash or Lesion _____ | <input type="checkbox"/> Vomiting _____ |
| <input type="checkbox"/> Scabies _____ | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Lice _____ | _____ |
| <input type="checkbox"/> Sore Throat _____ | _____ |
| <input type="checkbox"/> Eye Discharge _____ | _____ |

PARENT SIGNATURE: _____ DATE: _____ TIME: _____
STAFF SIGNATURE: _____ DATE: _____ TIME: _____

PHYSICIAN STATEMENT

This child may return to the TCDC, FCC Home, SAS Before and After, or Camp program on: _____
Treatment recommended: _____

PHYSICIAN SIGNATURE: _____ DATE: _____

CRITERIA FROM AR 608-1C

4-28 Illness criteria for denial of service

Children who appear to be ill or show visible signs of fever will be closely screened and may be denied admission based upon following symptoms:

- a. Temperature in excess of 101° F.
- b. Inability to participate in daily activities.
- c. Obvious illness such as
 - 1) Impetigo - Red oozing erosion capped with a golden yellow crust that appears stuck on.
 - 2) Scabies - Crusty wavy ridges and tunnels in the webs of fingers, hand, wrist, and trunk.
 - 3) Ringworm - Flat, spreading ring-shaped lesions.
 - 4) Chicken pox - Crops of small blisters on a red base that becomes cloudy and crusted in two to four days.
 - 5) Head lice-nits - Whitish-grey clot attached to hair shafts.
 - 6) Culture-proven strep infections that have not been under treatment for at least 24 hours.
 - 7) Conjunctivitis (pink eye) - Red watery eyes with thick yellowish discharge.
 - 8) Persistent cough, severe diarrhea or vomiting.
 - 9) Symptoms of other contagious diseases such as measles, mumps, hepatitis, and strep infections.
 - 10) Pinworm infestation

4-29 Readmission following illness

Children may be readmitted after treatment has begun, the contagious stage of the illness has passed, as defined by the installation health SOP, and the child is physically able to function in the program setting. Children may return to programs only if they are well enough to participate in usual daily activities and the following conditions exist:

- a. Fever has been absent for 24 hours.
 - b. Nausea, vomiting, or diarrhea has subsided for 24 hours.
 - c. Lesions from impetigo are no longer weeping.
 - d. Scabies is under treatment.
 - e. Lice are under treatment.
 - f. Pinworms are under treatment.
 - g. The child has completed the contagious stage of the illness.
 - h. Conjunctivitis has diminished to the point that eyes are no longer discharging.
 - i. The appropriate number of doses of antibiotics have been given over a 24-hour period for known strep and other bacterial infections, the child's physician has approved readmission and child does not require additional YS/SAS staff to care for him.
 - j. Chicken pox lesions are crusted, usually five to six days after onset.
- * Permit readmission of child after 24 hour treatment and physician's verification of treatment.
** Permit readmission of child the morning after treatment, with written verification of treatment from physician.
- NOTE: If rash is still present but under treatment, or no treatment is ordered, child may re-enter with written verification from physician stating child is NOT contagious.